

**POLITICAL COMMITTEE**  
**CITY/TOWN OF** Maricopa  
**CAMPAIGN FINANCE REPORT**  
**2010 March/May Regular Election**

FOR OFFICE USE ONLY

**FEB 23 2010**

1. The Committee to elect Bridger Kimball  
 Full Name of Committee 42543 W. Apple Rd.  
 Address Maricopa 85138 Pinal 980-694-1384  
 City ZIP Code County Phone
2. \_\_\_\_\_  
 Sponsoring Organization or Candidate and office
- \_\_\_\_\_  
 Name of Candidate and Office Sought (if applicable)
- \_\_\_\_\_  
 E-Mail Address Fax #

3A. ID#

4. **REPORTING PERIOD** (Please check appropriate box)

**DUE BETWEEN**

- ☐ January 31 Report - For Period of June 21, 2008 \* thru December 31, 2009 ..... January 1, 2010 and January 31, 2010
- ☒ Pre-Primary Election Report - For Period of January 1, 2010 thru February 17, 2010 ..... February 18, 2010 and February 25, 2010
- ☐ Post-Primary Election Report - For Period of February 18, 2010 thru March 29, 2010 ..... March 30, 2010 thru April 8, 2010
- ☐ Pre-General Election Report - For Period of March 30, 2010 thru April 28, 2010 ..... April 29, 2010 thru May 6, 2010
- ☐ Post-General Election Report - For Period of April 29, 2010 thru June 7, 2010 ..... June 8, 2010 and June 17, 2010
- ☐ \*\*January 31 Report - For Period of June 8, 2010 thru December 31, 2011 ..... January 1, 2012 and January 31, 2012

5. **SUMMARY**

	<b>Column A</b> Total This Reporting Period	<b>Column B</b> Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		<u>0</u>
5b Cash on Hand at the Beginning of this Reporting Period	<u>461.00</u>	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	<u>2755.14</u>	<u>5545.18</u>
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	<u>3216.14</u>	<u>5545.18</u>
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		<u>0</u>
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	<u>2544.04</u>	<u>4853.06</u>
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	<u>672.10</u>	<u>692.12</u>

\*Insert date which is 21 days after date of last election (A.R.S. §16-913).

\*\*Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Page 2

1. Committee Name: The Committee to Elect Bridger Kambell to City Council  
 2. ID# \_\_\_\_\_  
 3. Report covering period from 1-1-10 Thru 2-17-10

RECEIPTS		COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:			
(a) Individuals - more than \$25 (Total from Schedule A)		560.00	3240.02
(b) Individuals - aggregate \$25 or less (Total from Schedule A-1)		0.00	50.00
(c) Political Committees (Total from Schedule B)		0.00	0.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		560.00	3290.02
(e) Refund of contributions (Total from Schedule F-2)		0.00	0.00
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		560.00	3290.02
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		2195.14	2195.14
(b) All other loans (Total from Schedule C-1)		0.00	0.00
(c) Total Loans [add 5(a) and 5(b)]		2195.14	2195.14
6. In-kind contributions (Total from Schedule E)		0.00	60.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		0.00	.02
8. Total Receipts [add 4(f), 5(c), 6, and 7]		2755.14	5545.18
QUALIFYING CONTRIBUTION RECEIPTS			
Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).		0.00	0.00
DISBURSEMENTS			
9. Expenditures for operating expenses (Total from Schedule D)		2544.04	4793.06
10. Independent Expenditures (Total from Schedule D-1)		0.00	0.00
11. Value of In-kind expenditures (Total from Schedule E)		00.00	60.00
12. Loans made by reporting committee (Total from Schedule D-2)		0.00	0.00
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		0.00	0.00
(b) Repayment of all other loans (Total from Schedule D-5)		0.00	0.00
(c) Total Loan Repayments [add 13(a) and 13(b)]		0.00	0.00
14. Transfers to other political committees (Total from Schedule D-6)		0.00	0.00
15. Any other disbursement (Total from Schedule D-7)		0.00	10.00
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		2544.04	4853.06
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		0.00	0.00
18. Total disbursements [subtract line 17 from line 16]		2544.04	4853.06
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)		0.00	0.00
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.			
<div style="display: flex; justify-content: space-between;"> <div> <u>Matthew Shesto</u>                      Type or Print Name of Treasurer                 </div> <div> <u>2-22-10</u>                      Date                 </div> </div>			
Signature of Treasurer or Candidate or Designating Individual			

**SCHEDULE A-1**

2. ID #

\_\_\_\_\_thru\_\_\_\_\_

DESCRIPTION	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE	
5. TOTAL THIS PERIOD (Transfer total to Detailed Summary Page, Line 4(b), Column A)		6. CUMMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	

\*If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

# CONTRIBUTIONS FROM POLITICAL COMMITTEES

## SCHEDULE B

1. Committee Name NA

2. ID #

3. Report covering period from NA thru NA

4	CONTRIBUTIONS		AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	IDENTITY OF CONTRIBUTOR AND DATE RECEIVED			
4a	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]			

# OTHER LOANS

# SCHEDULE C1

1. Committee Name MA

2. ID #

3. Report covering period from MA thru

4	ALL OTHER LOANS	DATE LOAN RECEIVED	AMOUNT OF LOAN	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN.			
4a	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4b	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4c	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
4d	NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID#			
	DESCRIPTION			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 [If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A]			

## CONTRIBUTIONS more than \$25 - from INDIVIDUALS\*

## SCHEDULE A

1. Committee Name The committee to elect Bridger Kramel to city council

2. ID #

3. Report covering period from 1-1-10 thru 2-17-10

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
4a.	<div>LAST FIRST MI</div> <div>Portier Jordan</div> <div>STREET ADDRESS</div> <div>44798 W Alamedras</div> <div>CITY STATE ZIP</div> <div>Maricopa AZ 85139</div> <div>OCCUPATION EMPLOYER</div> <div>manager Verizon</div>	2/3/10	150	150
b.	<div>LAST FIRST MI</div> <div>Borchardt William</div> <div>STREET ADDRESS</div> <div>44868 W Garicon</div> <div>CITY STATE ZIP</div> <div>Maricopa AZ 85239</div> <div>OCCUPATION EMPLOYER</div> <div>Retired NA</div>	2/17/10	410	560
c.	<div>LAST FIRST MI</div> <div></div> <div>STREET ADDRESS</div> <div></div> <div>CITY STATE ZIP</div> <div></div> <div>OCCUPATION EMPLOYER</div> <div></div>			
d.	<div>LAST FIRST MI</div> <div></div> <div>STREET ADDRESS</div> <div></div> <div>CITY STATE ZIP</div> <div></div> <div>OCCUPATION EMPLOYER</div> <div></div>			
e.	<div>LAST FIRST MI</div> <div></div> <div>STREET ADDRESS</div> <div></div> <div>CITY STATE ZIP</div> <div></div> <div>OCCUPATION EMPLOYER</div> <div></div>			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)			

\*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

## CANDIDATE LOANS

SCHEDULE C

1.	Committee Name <u>Committee to elect Bridger Kimball to city</u>		2. AD # <u>2</u>
3.	Report covering period from <u>1-1-10</u> thru <u>2-17-10</u>		
4.	<b>LOANS MADE OR GUARANTEED BY CANDIDATE</b>	DATE RECEIVED	AMOUNT RECEIVED
	NAME AND ADDRESS FROM WHOM RECEIVED		CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	Bridger Kimball 42543 W. Duella Dr. Maricopa, AZ 85138	1-5-10	952.50
	DESCRIPTION See expense report / Sign AS		952.50
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	Bridger Kimball 42543 W. Duella Dr. Maricopa, AZ 85138	1-8-10	432.63
	DESCRIPTION See expense report / Decals		1385.13
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	Bridger Kimball 42543 W. Duella Dr. Maricopa, AZ 85138	1-11-10	200.01
	DESCRIPTION See expense report / JLS Promo		1585.14
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	Bridger Kimball 42543 W. Duella Dr. Maricopa, AZ 85138	1-15-10	610.00
	DESCRIPTION See expense report / Sign AS		2195.14
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION		
5.	ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A]		2195.14

## EXPENDITURES FOR OPERATING EXPENSES\*

## SCHEDULE D

1. Committee Name The Committee To Elect Bridger Kimball

2. ID #

3. Report covering period from Jan 1 thru Feb 17

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>IN MARICOPA.COM</u> <u>MARICOPA, AZ 85239</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Campaign Advertisement</u>	<u>2/4/10</u>	<u>333<sup>00</sup></u>
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Crystal Tech</u> <u>1125 W PINNACLE PEAK RD #103</u> <u>PHOENIX AZ 85027</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Web site Maintenance</u>	<u>1/1/10</u>	<u>7.95</u>
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Crystal Tech</u> <u>1125 W PINNACLE PEAK RD #103</u> <u>PHOENIX AZ 85027</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED	<u>2/1/10</u>	<u>7.95</u>
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Sign Depot</u> <u>1813 E COLONIAL DR</u> <u>ORLANDO FL 32803</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Signs - Candidate Loan Funds</u>	<u>1-5-10</u>	<u>952<sup>50</sup></u>
e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>All about Promotions</u> <u>19489 N VENTANA LANE</u> <u>MARICOPA AZ 85238</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Bumper Stickers - Candidate Loan</u>	<u>1-8-10</u>	<u>432.63</u>
f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>JLS Promotions</u> <u>36138 W ALHAMBRA ST</u> <u>MARICOPA AZ 85138</u> DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Advertising - Candidate Loan</u>	<u>1-11-10</u>	<u>200.01</u>
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		

\*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

## EXPENDITURES FOR OPERATING EXPENSES\*

## SCHEDULE D

1. Committee Name The committee to Elect Bridget Kimbrell City Council

2. ID #

3. Report covering period from 1-1-10 thru 2-17-10

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Victory store, com</u> <u>5200 SW 30th St,</u> <u>Davenport, IA 52802</u>	<u>1-15-10</u>	<u>610.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>campaign signs/candidate loan</u>		
b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A]		<u>2544.09</u>

\*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

# INDEPENDENT EXPENDITURES\*

## SCHEDULE D-1

1. Committee Name NA

2. ID #

3. Report covering period from NA thru NA

4	INDEPENDENT EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
	IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED		
4a.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4b.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
4c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • •		
	CANDIDATE OFFICE SOUGHT YEAR OF ELECTION		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A]		

\*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS	AMOUNT

# LOANS MADE BY REPORTING COMMITTEE

## SCHEDULE D-2

1. Committee Name NA

2. ID #

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	LOANS MADE BY THE REPORTING COMMITTEE	DATE LOAN MADE	AMOUNT OF THE LOAN
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
g.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
h.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
i.	NAME, ADDRESS, CITY, STATE, ZIP, AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 (Transfer total to Detail Summary Page Line 12, Column A)		

# OFFSETS TO OPERATING EXPENSES \*

SCHEDULE **D-3**

2. ID #

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES		DATE REFUND RECEIVED	AMOUNT OF THE REFUND
NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
	DESCRIPTION OF REFUND		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 (If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A)

\* Includes return of contributions made by reporting committee

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name NA

2. ID #

3. Report covering period from NA thru NA

REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE		DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE			
4a.	NAME, ADDRESS, CITY, STATE, AND ZIP		
b.	NAME, ADDRESS, CITY, STATE, AND ZIP		
c.	NAME, ADDRESS, CITY, STATE, AND ZIP		
d.	NAME, ADDRESS, CITY, STATE, AND ZIP		
e.	NAME, ADDRESS, CITY, STATE, AND ZIP		
f.	NAME, ADDRESS, CITY, STATE, AND ZIP		
5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A]			

# REPAYMENT OF ALL OTHER LOANS

SCHEDULE **D-5**

2. ID #

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	REPAYMENT OF ALL OTHER LOANS	DATE REPAYMENT MADE	AMOUNT OF THE REPAYMENT
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 [Transfer total to Detailed Summary Page, Line 13(b), Column A]		

# TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE **D-6**

1. Committee Name \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

2. ID # \_\_\_\_\_

4	TRANSFERS MADE BY THE REPORTING COMMITTEE	DATE TRANSFER MADE	AMOUNT OF THE TRANSFER
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]		

# ANY OTHER DISBURSEMENT

SCHEDULE **D-7**

1. Committee Name \_\_\_\_\_

2. ID # \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

ANY OTHER DISBURSEMENTS		DATE DISBURSEMENT MADE	AMOUNT OF THE DISBURSEMENT
	NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#  DESCRIPTION		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (Transfer total to Detailed Summary Page Line 15 Column A)

# IN-KIND CONTRIBUTIONS and EXPENDITURES

## SCHEDULE E

1. Committee Name \_\_\_\_\_

2. ID # \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	IN-KIND CONTRIBUTIONS and EXPENDITURES		DATE	FAIR MARKET VALUE
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN				
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION • • EXPENDITURE • •		
	DESCRIPTION			
	OCCUPATION	EMPLOYER		
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E <i>[If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]</i>			
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E <i>[If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]</i>			

# DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE **F-1**

1. Committee Name \_\_\_\_\_

2. ID # \_\_\_\_\_

3. Report covering period from \_\_\_\_\_ thru \_\_\_\_\_

4	DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS	DATE AMOUNT RECEIVED	AMOUNT OF THE RECEIPT
	NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED		
4a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF RECEIPT		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 <i>(if last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A)</i>		

# OFFSETS TO CONTRIBUTIONS RECEIVED \*

SCHEDULE **F-2**

1. Committee Name \_\_\_\_\_

2. ID # \_\_\_\_\_

3. Report covering period from \_\_\_\_\_

thru \_\_\_\_\_

4	REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED	DATE REFUND MADE	AMOUNT OF THE REFUND
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE		
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#		
	DESCRIPTION OF REFUND		

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A]

\* Includes return of contributions received by reporting committee